

Combined Anesthesiology-Pediatrics Curricular Requirements

This document enumerates the **minimum** curricular requirements for combined ACGME-accredited programs in anesthesiology and pediatrics, as approved by the American Board of Anesthesiology (ABA), American Board of Pediatrics (ABP), American Osteopathic Board of Anesthesiology (AOBA), and American Osteopathic Board of Pediatrics (AOBP). This information was collated on July 22, 2026 and will be updated as needed.

1. Total duration:
 - a. Five years (60 months) of education and training in combined anesthesiology and pediatrics
 - b. Additional time outside of the minimum requirements must be customized per the mission of the program and the individual needs of each resident
 - c. The first year of the program must provide broad education in the fundamental skills of medicine relevant to the practice of pediatrics and anesthesiology
 - d. Vacation or leave time must be equitably allocated between both participating specialties
2. Anesthesiology: 130 weeks (30 months)
 - a. Adult anesthesiology:
 - i. 50 weeks, either general or subspecialty
 - ii. No more than 26 weeks of these in one specialty
 - iii. This is in addition to the subspecialty requirements below
 - b. Obstetric anesthesiology: eight weeks
 - c. Pediatric anesthesiology: eight weeks after PGY-1
 - d. Neuroanesthesiology: eight weeks
 - e. Cardiothoracic anesthesiology: eight weeks
 - f. Critical care:
 - i. Critical care medicine with faculty anesthesiologists experienced in the practice and teaching of critical care: eight weeks
 - g. Pain medicine: 12 weeks to consist of four weeks of acute pain, four weeks of chronic pain, and four weeks of regional anesthesiology
 - h. Post-anesthesia care unit: two weeks
 - i. Pre-operative medicine: two weeks
 - j. Non-operative room anesthesia: two weeks
 - k. Advanced anesthesiology
 - i. 18 weeks
 - ii. Rotations to be decided by the program director and the resident
 - iii. For these rotations, the resident must be engaged in operating room (OR)-based anesthesiology (or engaged in the delivery of anesthesia in

- non-OR anesthetizing locations, such as endoscopy, interventional radiology, regional anesthesiology, and obstetric anesthesiology)
 - iv. Rotations that are excluded for these 18 weeks include post-anesthesia care unit (PACU), intensive care unit (ICU), acute pain, chronic pain medicine, pre-operative clinic, and research rotations
- 3. Pediatrics: 130 weeks (30 months) of broad-based, clinically oriented general pediatrics experiences as described in the ACGME Program Requirements for Graduate Medical Education in Pediatrics, which must include:
 - a. Newborn nursery: four weeks
 - b. Adolescent medicine: four weeks
 - c. Developmental-behavioral pediatrics: four weeks
 - d. Pediatric emergency medicine and acute illness: 12 weeks, eight of which must occur in an emergency department
 - e. Mental health: four weeks
 - f. ICU:
 - i. Four weeks neonatal ICU
 - ii. Four weeks pediatric ICU
 - iii. Four additional weeks of neonatal or pediatric ICU
 - g. Outpatient pediatric subspecialties: four weeks (composed of at least two subspecialties)
 - h. Inpatient pediatrics: 24 weeks
 - i. 16 weeks of general pediatrics or pediatric hospital medicine service
 - i. General ambulatory pediatric clinic: eight weeks in addition to the longitudinal clinic requirement and must be a broad experience
 - j. Individualized pediatrics curriculum: 40 weeks
 - i. 20 weeks of pediatric subspecialty experiences
 - 1. Double counting of subspecialty experiences is not allowed, and anesthesiology rotations should not be utilized to fulfill the pediatric subspecialty requirements
 - ii. 20 weeks of elective experiences
 - k. Supervisory experiences: 16 weeks
 - i. Eight weeks on general pediatrics/pediatric hospital medicine service
 - ii. This may occur during any of the pediatric rotations specified above and do not need to be additional experiences
 - l. 30 months of broad-based, general pediatrics ambulatory longitudinal continuity clinic experiences
 - i. Minimum of 90 half-day sessions over the duration of education and training, scheduled to maximize continuity of care (describe in block diagram notes)